

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**RESPONSE UNDER RULE 116
EXPEDITED HANDLING PROCEDURES**

In re Patent Application of



Atty Dkt. DMB-4480-65
C# M#

BELL

C/A.U.

1771

Serial No. 10/827,417

Examiner: Cheryl Ann Juska

Filed: April 20, 2004

Date: September 18, 2008

Title: USE OF WASTE CARPET AS FILLER

FW/AF
\$ -

Mail Stop AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

09/19/2008 WABDELRI 00000023 141140 10827417

01 FC:1253 1050.00 DA

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☒ **Divisional Application filed concurrently herewith.**

Fees are attached as calculated below:

Total effective claims after amendment 0 minus highest number
previously paid for 20 (at least 20) = 0 x \$50.00 \$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment 0 minus highest number
previously paid for 3 (at least 3) = 0 x \$210.00 \$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add
\$370.00 (1203)/\$185.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this
paper and attachment(s)

One Month Extension \$120.00 (1251)/\$60.00 (2251)

Two Month Extensions \$460.00 (1252)/\$230.00 (2252)

Three Month Extensions \$1050.00 (1253)/\$525.00 (2253)

Four Month Extensions \$1640.00 (1254)/\$820.00 (2254)

Five Month Extensions \$2,230.00 (1255)/\$1115.00 (2255) \$ 1050.00

Terminal disclaimer enclosed, add \$130.00 (1814)/\$65.00 (2814) \$

☐ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) \$ 0.00

Assignment Recording Fee \$40.00 (8021) \$ 0.00

Other: \$ 0.00

PLEASE CHARGE OUR DEPOSIT ACCOUNT FOR THE TOTAL FEE \$ 1050.00

☐ **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor
Arlington, Virginia 22203-1808
Telephone: (703) 816-4000
Facsimile: (703) 816-4100
DMB:lmo

NIXON & VANDERHYE P.C.
By Atty: Duane M. Byers, Reg. No. 33,363

Signature: _____

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